Entity Number Contact Persor	132971_ Candace Vande	rlip			Applica	ant's Form Ident Iumber	(608) 758	2002 1A 1-6232				
Instructions	5: Discoun : Use one Block 5 p ny copies of this pag	age for EACH s	ervice (Fur and numb	nding Request Num	ages to assure	that they are	-	Block 5, pag	ge1	of33		
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12 Form	70 Application Nu	mber (15 digits)	5	78450000323389		le Vendor Se Form 470 filing)	lection/Contract	Date (mm/dd/yyy	y)	12/06/2000		
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identii	Identification Number (9 digits) 143001856 19a Service Start Date (mm/dd/yyyy) 07/01/2001											
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 06/30/2002											
14 Servic	Service Provider Name Ameritech 20 Contract Expiration Date (mm/dd/yyyy)											
71	ption of ervice:		with an At	iption of the service tachment #, and no ervice - #1				osts, plus any i	relevant bra	and names. Label		
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23 Calcul		ecurring Char	anc		l Mon-	Recurring C	harge	I	Total Cha	rae		
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457	0	457	12	5484	0	0	0	5484	44%	2413		

Entity Nu Contact F		132971 Candace Vande	rlip					ant's Form Ident lumber	ifier <u>CESA2</u> (608) 758	2002 1A 3-6232		
Instruct	tions: Us s many o		age for EACH se	ervice (Fur and numb	IUEST(S) Inding Request Number the completed page assigned b	ages	to assure	that they are		Block 5, pagrectly.	ge2	of33
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12 F	orm 470	Application Nu	mber (15 digits)	5	78450000323389				lection/Contract	Date (mm/dd/yy)	ry)	12/06/2000
9		rvice Provider	-			9 (based on Form 470 filing) 12/06/2000 18 Contract Award Date (mm/dd/yyyy)						
ld	lentifica:	ion Number (9 d	igits)	1430018	 56	19a Service Start Date (mm/dd/yyyy) 07/01/2001						
						19b	Service I	End Date (mm	/dd/yyyy) (use only fo	or "T" or "MTM" se	ervices)	06/30/2002
14 S	4 Service Provider Name Ameritech 20 Contract Expiration Date (mm/dd/yyyy)											
וט ו	escription his Serv	on of ice:		with an At	ription of the service ttachment #, and no ervice - #1					osts, plus any i	relevant bra	and names. Label
	ntity/Ent eceiving	ities This Service:	this service :	Head Star	ecific (provided to o rt Office - 132971 by all entities on a l			•	,.		e entity fro	m Block 4 receiving
23 C	alculatio		ecurring Char	·400	- 1		Mon	Poourring (`hargaa	1	Total Cha	ardoc
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22	23	o	223	12	2676	-	0	0	0	2676	44%	1177

-	Number ct Person	132971 Candace Vande	rlip				ant's Form Ident Number	tifier <u>CESA2</u> (608) 758					
	uctions: Us		,	ervice (Fur	UEST(S) Inding Request Num The assigned b	-			Block 5, pa	ge3	of33		
11	Category	of Service (only 0	ONE category should be	e checked)		15 Contrac	t Number (if av	ailable; use "T" if tariffed as as described in Instruc	· ·	Phone	rates (bills) = T		
	Telecomm	munications Service	O Internet Acc	ess O Ir	nternal Connections	16 Billing A	Account Num	ber (e.g., billed telephor	ne number)	608 2	50-5210 131 6		
12	Form 470	Application Nu	mber (15 digits)	5	78450000323389		ole Vendor Se Form 470 filing)	lection/Contract	Date (mm/dd/yyy	y)	12/06/2000		
13		rvice Provider				18 Contrac	t Award Date	(mm/dd/yyyy)					
	Identificat	tion Number (9 d	igits)	1430018	56	19a Service	Start Date (mr	n/dd/yyyy)		07/01/2	001		
	19b Service End Date (mm/dd/yyyy) (use only for 'T' or 'MTM' services) 06/30/2002												
14	4 Service Provider Name Ameritech 20 Contract Expiration Date (mm/dd/yyyy)												
21	Description This Servi	on of rice:		with an At	ription of the service tachment #, and no ervice - #1				osts, plus any i	relevant bra	and names. Label		
22	Entity/Ent Receiving	tities 1 This Service:	this service :	Dane Cou	ecific (provided to or inty Office - 132971 by all entities on a l				•	•	m Block 4 receiving		
23	Calculatio		o oursing Char		1	l Non	Decumina (Charges !		Total Ch	2.500		
	Λ	B	ecurring Char C	ges D	E	F	-Recurring C	Juaryes H	I	Total Cha	arges K		
(total		l	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non- recurring (one-	How much of the \$ amount in	Annual eligible pre-	Total program year pre-discount		Funding Commitment \$ Request (x J)		
	121	0	121	12	1452	0	0	0	1452	44%	639		

Entity Number Contact Person	132971 Candace Vande	rlip_				ant's Form Ident Tumber	ifier <u>CESA2</u> (608) 758	2002 1A 3-6232		
	se one Block 5 p	age for EACH s	ervice (Fur and numb	uest(s) Inding Request Number the completed page assigned b	ages to assure	that they are	-	Block 5, pa	ge4	of33
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12 Form 470	Application Nu	mber (15 digits)	5	78450000323389		le Vendor Se Form 470 filing)	lection/Contract	Date (mm/dd/yy)	/y)	12/06/2000
· ·	rvice Provider				18 Contract Award Date (mm/dd/yyyy)					
Identificat	t ion Number (9 d	ligits)	1430018	56	19a Service	Start Date (mr	n/dd/yyyy)		07/01/2	001
					19b Service i	End Date (mm	/dd/yyyy) (use only fo	or "T" or "MTM" se	ervices)	06/30/2002
14 Service P	rovider Name		Amerite	ch	20 Contract	Expiration D	ate (mm/dd/yyyy)			
Description 21 This Serv			with an At	iption of the service tachment #, and no ervice - #1				costs, plus any	relevant bra	and names. Label
22 Entity/Ent Receiving	ities This Service:	this service :	Janesville	ecific (provided to or Office - 132971 by all entities on a l		•	·			m Block 4 receiving
23 Calculation						D	NI	1	Tatal Ob	
Λ	B	ecurring Char C	ges D	E	F Non-	Recurring C	narges H	1	Total Cha	arges K
Monthly \$ charges (total amount per month for service)		Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non- recurring (one-	How much of the \$ amount in	Annual eligible pre-	Total program year pre-discount		Funding Commitment \$ Request (x J)
226	0	226	12	2712	0	0	0	2712	44%	1193

Entity Number Contact Person	Candace Vande	rlip	***************************************			ant's Form Ident Number	(608) 758	2002 1 A 1-6232	*************************			
nstructions: U	•	age for EACH s	ervice (Fur and numb	uest(s) Inding Request Number the completed page assigned by	ages to assure	that they are	sting discounts.	Block 5, pagrectly.	ge5	of33		
11 Category	of Service (only C	NE category should b	e checked)				ailable; use "T" if tariffed s as described in Instruc		Phone	rates (bills) = T		
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12 Form 470	Application Nu	mber (15 digits)	5	78450000323389		ile Vendor Se Form 470 filing)	lection/Contract	Date (mm/dd/yy)	/y)	12/06/2000		
13 SPIN - Se		ita\			18 Contrac	Award Date	(mm/dd/yyyy)					
identilica	Identification Number (9 digits) 143001856 19a Service Start Date (mm/dd/yyyy) 07/01/2001											
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 06/30/2002											
14 Service P	Service Provider Name Ameritech 20 Contract Expiration Date (mm/dd/yyyy)											
21 Description This Serve			with an At	iption of the service tachment #, and no ervice - #1				osts, plus any l	relevant bra	and names. Label		
22 Entity/Ent Receiving	ities This Service:	this service :	<u>Janesville</u>			-			e entity froi	m Block 4 receiving		
23 Calculatio	•	ecurring Char	ues		Non	-Recurring C	harnes I	<u> </u>	Total Cha	arnes		
A	В	C	D	E	F	G	Н	I	J	K		
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non- recurring (one- time) \$ charges	How much of the \$ amount in (F) is ineligible?		Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (!xJ)		
50	0	50	0	0	600	44%	264					

Entity Number Contact Person	132971 Candace Vande	rlip				ant's Form Ident Iumber		2002 1A 3-6232					
nstructions: U Make as many c	copies of this pag	age for EACH so le as necessary,	ervice (Fur and numb	nding Request Num per the completed pa	ages to assure	that they are		Block 5, pagrectly.	ge6	of_33			
11 Category	of Service (only C	NE category should b	e checked)		15 Contract	Number (if av	ailable; use "T" if tariffed s as described in Instruc		Phone	rates (bills) = T			
Telecom	munications Service	O Internet Acc	tess O I	nternal Connections	16 Billing A	ccount Num	ber (e.g., billed telepho	ne number)	920 €	74-0666 659 1			
12 Form 470	Application Nu	mber (15 digits)	5	78450000323389		le Vendor Se Form 470 filing)	lection/Contract	Date (mm/dd/yy)	/ y)	12/06/2000			
	rvice Provider	P_N_3			18 Contract	Award Date	(mm/dd/yyyy)						
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	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 06/30/2002												
14 Service P	Service Provider Name Ameritech 20 Contract Expiration Date (mm/dd/yyyy)												
י וע	You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label												
22 Entity/En Receiving	tities g This Service:	this service :	Head Star	ecific (provided to or t Office - 132971 by all entities on a l		•	·		e entity froi	m Block 4 receiving			
23 Calculation					1			1					
A	В	ecurring Char C	ges D	E	Non- F	Recurring C	narges H	T T	Total Cha	arges K			
	How much of the \$ amount in (A) is ineligible?		# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non- recurring (one-	How much of the \$ amount in	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	Total program year pre-discount	% discount (from Block 4 Worksheet)				
48	0	48	12	576	0	0	0	576	44%	253			

ontact Person	Candace Vande	rlip				Number		2002 1 A 3-6232				
nstructions: U	copies of this pag	age for EACH se	ervice (Fur and numb	uest(s) Inding Request Number the completed page	ages to assur	e that they are		Block 5, page	ge7	of33		
	of Service (only C		e checked)	nternal Connections	15 Contrac "MTM" if mor	t Number (if av ath-to-month service	ailable; use "T" if tariffed s as described in Instruc	tions)		rates (bills) = T		
	Application Nu				17 Allowak		ber (e.g., billed telepho lection/Contract			12/06/2000		
13 SPIN - Se	3 SPIN - Service Provider 18 Contract Award Date (mm/dd/yyyy)											
Identificat	Identification Number (9 digits) 143001856 19a Service Start Date (mm/dd/yyyy) 07/01/2001											
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 06/30/2002											
14 Service P	Service Provider Name Ameritech 20 Contract Expiration Date (mm/dd/yyyy)											
Description 21 This Serv	ice:		with an At	ription of the service tachment #, and no ervice - #1				osts, plus any	relevant bra	and names. Label		
22 Entity/Ent Receiving	tities 1 This Service:	this service :	Fort Atkin	ecific (provided to or son Office - 13297 by all entities on a l	1				·	m Block 4 receiving		
23 Calculation												
A	B R	ecurring Char	ges D	E	Non F	-Recurring (Charges H	Т	Total Cha	arges K		
	How much of the \$ amount in (A) is ineligible?		# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non- recurring (one-	How much of the \$ amount in	Annual eligible pre-	Total program year pre-discount \$ amount (E + H)		Funding Commitment \$ Request (IxJ)		
91 0 91 12 1092 0 0 1092 44% 480										480		

Entity Number Contact Person	Candace Vande	rlip		ADAZZARA COROLO COROLO DE SECURIO CONTROLO DE COROLO DE COROLO DE COROLO DE COROLO DE COROLO DE COROLO DE CORO		ant's Form Ident Number	(608) 758					
nstructions: U	•	age for EACH se	ervice (Fur and numb	uest(s) Inding Request Number the completed page	ages to assure	that they are	sting discounts.	Block 5, pagrectly.	ge8	of33		
11 Category	of Service (only C	NE category should be	e checked)			-	: ailable; use "T" if tariffed s as described in Instruc		Phone	rates (bills) = T		
● Telecomm	nunications Service	O Internet Acc	ess O I	nternal Connections	16 Billing A	ccount Numi	ber (e.g., billed telephor	ne number)	608 7	41-6687 297 5		
12 Form 470	Application Nu	mber (15 digits)	5	78450000323389		le Vendor Se Form 470 filing)	lection/Contract	Date (mm/dd/yy)	y)	12/06/2000		
13 SPIN - Se					18 Contrac	Award Date	(mm/dd/yyyy)					
Identificat	Identification Number (9 digits): 143001856 19a Service Start Date (mm/dd/yyyy) 07/01/2001											
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 06/30/2002											
14 Service P	4 Service Provider Name Ameritech 20 Contract Expiration Date (mm/dd/yyyy)											
21 Description This Serv			with an At	ription of the service tachment #, and no ervice - #1			•	osts, plus any	relevant bra	and names. Label		
22 Entity/Ent Receiving	ities This Service:	this service :	Janesville	ecific (provided to or Office - 132971 by all entities on a l		-	·	-	e entity fro	n Block 4 receiving		
23 Calculation		ecurring Char	ges		Non	Recurring C	harges		Total Cha	arges		
Λ	В	C	D	E	F	G	Н	I	J	К		
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non- recurring (one- time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	' '	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (IxJ)		
203	0	203	12	2436	0	0	0	2436	44%	1072		

-	Number t Person	132971_ Candace Vande	rlip				Applica _ Phone N	int's Form Ident umber	(608) 758	2002 1A_ -6232			
Instru	ctions: Us as many c	opies of this pag	age for EACH so e as necessary,	ervice (Fur and numb	nding Request Num er the completed p	ages	to assure	that they are	sting discounts.	Block 5, pag	ge9_	of _33	
11	Category	of Service (only C	NE category should be	e checked)		17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 18 Contract Award Date (mm/dd/yyyy) 19a Service Start Date (mm/dd/yyyy) 19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 20 Contract Expiration Date (mm/dd/yyyy) rvice, including a breakdown of components and costs, plus any relevant brand names. Label d note number in space provided below. to one site and not shared by others), list the Entity Number of the entity from Block 4 receiving					rates (bills) = T		
(T elecomn	nunications Service	O Internet Acc	ess O I	nternal Connections	· · · · · · · · · · · · · · · · · · ·					053	172 6237 001	
12	Form 470	Application Nu	mber (15 digits)	5	78450000323389				lection/Contract	Date (mm/dd/yyy	y)	12/06/2000	
		rvice Provider				18	Contract	Award Date	(mm/dd/yyyy)				
										001			
		·				19b	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 06/30/2002						
14 :	Service P	rovider Name		AT&1	Ť	20	Contract	Expiration D	ate (mm/dd/yyyy)				
										osts, plus any r	elevant bra	and names. Label	
	Entity/Ent Receiving	This Service:	this service :	Dane Cou	ecific (provided to or inty Office - 13297 by all entities on a l	1			·		e entity fro	m Block 4 receiving	
23	Calculatio		in Char			1	Non	Decumina C	\hausaa		Total Ch		
	A	B	ecurring Char C	ges D	E		F	Recurring C	H	1	Total Cha	K K	
(total a	Monthly \$ charges (total amount per month for service) How much of the \$ Eligible monthly pre-discount months amount for eligible? (A minus B) # of months amount for eligible recurring charges (A minus B) # of months amount program year							How much of the \$ amount in (F) is ineligible?	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	year pre-discount	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (IxJ)	
	180	0	180	12	2160		0	0	0	2160	44%	950	

Page 4 of 6 FCC Form 471 -- October 2000

-	Number ct Person	132971 Candace Vande	rlip_				Applica _ Phone N	int's Form Identi umber	(608) 758	2002 1A_ I-6232_			
Instru	uctions: Us as many c	•	age for EACH se	ervice (Fur and numb	uest(s) Inding Request Number the completed page See assigned by	ages	to assure	that they are	sting discounts.	Block 5, pag	ge10	of33	
11	Category	of Service (only 0	NE category should be	checked)		1		•	ailable; use "T" if tariffed s as described in Instruc		Phone	rates (bills) = T	
ı	Telecomn	nunications Service	O Internet Acc	ess O I	nternal Connections				oer (e.g., billed telephor	,	053	208 7817 001	
12	Form 470	Application Nu	mber (15 digits)	5	78450000323389			e Vendor Sel orm 470 filing)	ection/Contract	Date (mm/dd/yyy	у)	12/06/2000	
		rvice Provider	:_u_a			18	8 Contract Award Date (mm/dd/yyyy)						
	Identilicat	t ion Number (9 d	igns)	1430011	92	19a	Service	Start Date (mn	n/dd/yyyy)		07/01/2	001	
19b Service End Date (mm/dd/yyyy) (use only for 'T' o										or "T" or "MTM" se	ervices)	06/30/2002	
14	Service P	rovider Name		AT&1	r	20	Contract	Expiration D	ate (mm/dd/yyyy)				
21	Description This Servi			with an At	iption of the service tachment #, and no ervice - #1					osts, plus any i	relevant bra	and names. Label	
22	Entity/Ent Receiving	This Service:	this service :	Milton Of	**		 	-	·		·	m Block 4 receiving	
23	Calculatio									1			
	A		ecurring Char		Tr.		Non-	Recurring C	harges H	1	Total Cha	arges K	
(total	A B C D E Monthly \$ charges (total amount per month for service) Ineligible? Inel						nual non- rring (one-	How much of the \$ amount in	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	Total program year pre-discount	% discount	Funding Commitment \$ Request (IxJ)	
	106	0	106	12	1272		0	0	0	1272	44%	560	

Page 4 of 6 FCC Form 471 -- October 2000

Entity Number 132971 Applicant Contact Person Candace Vanderlip Phone Num									ifier <u>CESA2</u> (608) 758				
instr	uctions: Us as many c		age for EACH s	ervice (Fur and numb	uest(s) nding Request Num per the completed p pe assigned b	ages	to assure	that they are	sting discounts.	Block 5, pag	ge11	of33	
11		of Service (only C		="	nternal Connections	•	MTM" if mont	h-to-month service	ailable; use "T" if tariffed s as described in Instruc	tions)		rates (bills) = T	
12		Application Nu			78450000323389	17	Allowabi		oer (e.g., billed telephor lection/Contract			12/06/2000	
13		rvice Provider			•	18	Contract	Award Date	(mm/dd/yyyy)				
Identification Number (9 digits) 143001819 19a Service Start Date (mm/dd/yyyy) 07/01/2001													
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 06/30/2002												
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21	Description This Serv			with an At	ription of the service ttachment #, and no ervice - #1					osts, plus any i	relevant bra	and names. Label	
22	Entity/Ent Receiving	This Service:	this service :	Milton Of	**						e entity fro	m Block 4 receiving	
23	Calculatio		i Ob				.	D	· · · · · · · · · · · · · · · · · · ·	1	T-4-1 Ob		
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(total	nly \$ charges I amount per h for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges	recu	nual non- erring (one-	How much of the \$ amount in	Annual eligible pre-		% discount	Funding Commitment \$ Request (IxJ)	
	231	0	231	12	2772		0	0	0	2772	44%	1220	

Entity Number Contact Person	132971 Candace Vande	rlip_				ant's Form Iden Number	tifier <u>CESA2</u> (608) 758	2002 1A 3-6232			
Instructions: U Make as many o		age for EACH se	ervice (Fur and numb	nding Request Num per the completed pa	ages to assure	that they are		Block 5, pa	ge12	of _33	
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	of Service (only O	• •	•			•	ailable; use "T" if tariffed es as described in Instruc	•	Phone	rates (bills) = T	
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12 Form 470	Application Nu	mber (15 digits)	5	78450000323389		le Vendor Se Form 470 filing)	lection/Contract	Date (mm/dd/yy)	/y)	12/06/2000	
	rvice Provider				18 Contract Award Date (mm/dd/yyyy)						
Identification Number (9 digits) 143001819 19a Service Start Date (mm/dd/yyyy) 07/01/20											
19b Service End Date (mm/dd/yyyy) (use only for 'T' or 'MTM' services) 06/30/2002											
14 Service P	14 Service Provider Name Centurytel 20 Contract Expiration Date (mm/dd/yyyy)										
Description 21 This Serv	on of rice:		with an At	ription of the service ttachment #, and no ervice - #1				osts, plus any	relevant bra	and names. Label	
22 Entity/Ent Receiving	tities 1 This Service:	this service :	Milton Off			•	·	-	·	m Block 4 receiving	
23 Calculation					.,	_		1			
A	Re B	ecurring Char	ges D	E	Non-	Recurring (Charges H	I	Total Cha	arges K	
Monthly \$ charges (total amount per month for service)				Annual pre-discount \$ amount for eligible recurring charges	Annual non- recurring (one-	How much of the \$ amount in	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	Total program year pre-discount	% discount	Funding Commitment \$ Request (IxJ)	
218	0	218	12	2616	0	0	0	2616	44%	1151	

entity Number Contact Person	132971 Candace Vande	rlip_				licant's Form ideni e Number	(608) 758	2002 1A_ 3-6232		
nstructions	•	age for EACH s	ervice (Fur and numb	uest(s) nding Request Num per the completed pr pe assigned b	ages to ass	ire that they are	_	Block 5, pag	ge13	of33
11 Catego	ry of Service (only (ONE category should b	e checked)	_			ailable; use "T" if tariffed as as described in Instruc		Phone	rates (bills) = T
Teleco	mmunications Service	O Internet Acc	ess O I	nternal Connections			ber (e.g., billed telepho		26	52 593 5979
12 Form 4	70 Application Nu	mber (15 digits)	5	78450000323389		able Vendor Se on Form 470 filing)	lection/Contract	Date (mm/dd/yy)	/y)	12/06/2000
	3 SPIN - Service Provider Identification Number (9 digits) 18 Contract Award Date (mm/dd/yyyy)									
iaentii	Identification Number (9 digits) 143001819 19a Service Start Date (mm/dd/yyyy) 07/01/2001									
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 06/30/2002									
14 Service	Provider Name		Century	tel	20 Contra	ct Expiration [Date (mm/dd/yyyy)			
21 Descri This S	otion of rvice:		with an At	ription of the service tachment #, and no ervice - #1				costs, plus any i	relevant bra	and names. Label
-	Entities ng This Service:	this service :	Head Star	ecific (provided to o nt Office - 132971 by all entities on a l		_	•		e entity fro	m Block 4 receiving
23 Calcula		ecurring Char	nes		i Ne	n-Recurring (Charges	1	Total Cha	ardes
A	В	C	D	E	F	G	H	I	J	К К
Monthly \$ charg (total amount p month for servi	er amount in (A) is	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non recurring (on time) \$ charg	e- the \$ amount in	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	· ·	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (IxJ)
81	o	81	12	972	0	0	0	972	44%	428

ntity Number Contact Person	132971 Candace Vande	rlip					ant's Form Ident lumber	ifier <u>CESA2</u> (608) 758	2002 1A 3-6232	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
nstructions: Us		age for EACH s	ervice (Fui and numb	Juest(s) Inding Request Number the completed page The assigned by	ages to a	assure	that they are	sting discounts.	Block 5, pag	ge14	of33
11 Category	of Service (only C	NE category should be	e checked)					ailable; use "T" if tariffed s as described in Instruc		Phone	rates (bills) = T
Telecomn	nunications Service	O Internet Acc	ess OI	nternal Connections				ber (e.g., billed telepho			3681861
12 Form 470	Application Nu	mber (15 digits)	5	78450000323389			e Vendor Se orm 470 filing)	lection/Contract	Date (mm/dd/yyy	ry)	12/6/2000
-	3 SPIN - Service Provider Identification Number (9 digits) 18 Contract Award Date (mm/dd/yyyy)										
Identificat	143000074 19a Service Start Date (mm/dd/yyyy) 07/01/2001										
	19b Service End Date (mm/dd/yyyy) (use only for 'T' or 'MTM' services) 06/30/2002										
14 Service P	rovider Name	ı	vic Leod l	JSA	20 Cor	ntract	Expiration D	ate (mm/dd/yyyy)			
Description This Servi			with an Al	ription of the service ttachment #, and no ervice - #1					osts, plus any i	relevant bra	and names. Label
22 Entity/Ent Receiving	ities This Service:	this service :	Janesville		.		•	,	-	e entity fro	m Block 4 receiving
23 Calculatio		ecurring Char	ges			Non-	Recurring (Charges		Total Cha	arges
A	В	C ·	D	E	F		G	H	I	J	K
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual r recurring time) \$ ch	(one-	How much of the \$ amount in (F) is ineligible?	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	,	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (IxJ)
157	0	157	12	1884	0		0	0	1884	44%	829

-	Number ct Person												
nstri /lake	uctions: Us as many c		age for EACH s	ervice (Fui and numb	nding Request Num per the completed pa	ages to	o assure	that they are	_	Block 5, pag	ge15	of33	
AN			_		oe assigned b		***********	*************	allable; use "T" if tariffed	services			
		of Service (only C	• •	•				•	s as described in Instruc	,	Phone	rates (bills) = T	
	Telecom	nunications Service	O Internet Acc	tess O I					ber (e.g., billed telepho			16483	
12	Form 470	Application Nu	mber (15 digits)	5	78450000323389		17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 12/06/2000						
13 SPIN - Service Provider 18 Contract Award Date (mm/dd/yyyy)													
	Identification Number (9 digits) 143001117 19a Service Start Date (mm/dd/yyyy) 07/01/2001												
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 06/30/2002												
14	Service P	rovider Name		Powerco	om	20 C	Contract	Expiration D	ate (mm/dd/yyyy)				
21	Description This Serv	on of ice:		with an At	ription of the service ttachment #, and no ervice - #1					osts, plus any i	relevant bra	and names. Label	
22	Entity/Ent Receiving	ities This Service:	this service :	Milton Off			· · · · ·	_			e entity fro	m Block 4 receiving	
23	Calculation			•									
		B R	ecurring Char C		E		Non-	Recurring C	harges H	I	Total Cha	arges K	
A B C D E Monthly \$ charges (total amount per nonth for service) How much of the \$ amount in (A) is ineligible? Eligible monthly pre-discount amount or eligible? Annual pre-discount amount service (A minus B) Formula pre-discount amount or eligible? C x D) Formula pre-discount amount for eligible? Formula pre-discount amount for eligible							ual non- ing (one-	How much of the \$ amount in	Annual eligible pre-	Total program year pre-discount	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (IxJ)	
	100	0	100	12	1200		0	0	0	1200	44%	528	

Entity Number Contact Person										
Instructions: U	-	age for EACH s	ervice (Fur and numb	uest(s) nding Request Num per the completed pa pe assigned b	ages to assure	that they are	sting discounts.	Block 5, pag	ge16	of _33
	of Service (only 0		•				ailable; use "T" if tariffed is as described in Instruc		Phone	rates (bills) = T
● Telecomr	nunications Service	O Internet Acc	ess O I	nternal Connections			ber (e.g., billed telepho			16485
12 Form 470	Application Nu	mber (15 digits)	5	78450000323389		le Vendor Se Form 470 filing)	lection/Contract	Date (mm/dd/yyy	y)	12/06/2000
	3 SPIN - Service Provider Identification Number (9 digits) 18 Contract Award Date (mm/dd/yyyy)									
identilica	Identification Number (9 digits) 143001117 19a Service Start Date (mm/dd/lyyyy) 07/01/2001									
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 06/30/2002									
14 Service P	Service Provider Name Powercom 20 Contract Expiration Date (mm/dd/yyyy)									
21 Description This Serv			with an At	ription of the service tachment #, and no ervice - #1			•	osts, plus any i	relevant bra	and names. Label
22 Entity/Ent Receiving	tities j This Service:	this service :	Head Star	ecific (provided to or rt_Office - 132971 by all entities on a l		-	•	•	-	m Block 4 receiving
23 Calculation		oourring Char	1900		Non	Recurring C	`haras	ı	Total Cha	rac
A	В	ecurring Char C	ges D	E	F	G G	H H	I	J	K K
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ arnount for eligible recurring charges (C x D)	Annual non- recurring (one- time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	year pre-discount		Funding Commitment \$ Request (IxJ)
37	0	37	12	444	0	0	0	444	44%	195

Entity Number Contact Person										
Instructions: U		age for EACH s	ervice (Fur and numb	uest(s) nding Request Num per the completed pa pe assigned b	ages to assure	that they are	•	Block 5, pag	ge17	of33
11 Category	of Service (only 0	ONE category should b	e checked)			•	ailable; use "T" if tariffed is as described in Instruc	•	Phone	rates (bills) = T
Telecom	munications Service	O Internet Acc	ess O I	nternal Connections			ber (e.g., billed telepho			16486
12 Form 470	Application Nu	mber (15 digits)	5	78450000323389		le Vendor Se Form 470 filing)	lection/Contract	Date (mm/dd/yyy	/y)	12/06/2000
	rvice Provider					t Award Date	(mm/dd/yyyy)			
Identifica	Identification Number (9 digits) 143001117 19a Service Start Date (mm/dd/yyyy) 07/01/2001									
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 06/30/2002									
14 Service F	rovider Name		Powerco	om	20 Contrac	t Expiration D	ate (mm/dd/yyyy)		_	
21 Descripti This Serv			with an At	ription of the service ttachment #, and no ervice - #1				costs, plus any i	relevant bra	and names. Label
22 Entity/En Receiving	tities g This Service:	this service :	Head Star	ecific (provided to or rt Office - 132971 by all entities on a l	- 	-	,		e entity fro	m Block 4 receiving
23 Calculation		ecurring Char	'nec		Non	-Recurring C	harnes	1	Total Cha	ardes
A	В	C	D	E	F	G	Н	I	J	K
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non- recurring (one- time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	l' '	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (IxJ)
41	41 0 41 12 492 0 0 0 492 44% 216									

Entity Number Contact Person	132971 Candace Vande	rlip	***************************************				ant's Form ident lumber	ifier <u>CESA2</u> (608) 758			
nstructions: U	•	age fo r EACH se	ervice (Fur and numb	Juest(s) Inding Request Number the completed page assigned by	ages t	o assure	that they are	sting discounts.	Block 5, pagrectly.	ge18	of33
	of Service (only C	* *	<u>-</u>				•	ailable; use "T" if tariffed s as described in Instruc	•	Phone	rates (bills) = T
Telecom	munications Service	O Internet Acc	ess O I	nternal Connections	16 E	Billing A	ccount Numl	oer (e.g., billed telephor	ne number)		16487
	Application Nu	mber (15 digits)	5	78450000323389		le Vendor Se form 470 filing)	lection/Contract	Date (mm/dd/yy)	ry)	12/06/2000	
13 SPIN - Service Provider 18 Contract Award Date (mm/dd/yyyy)											
identifica	Identification Number (9 digits) 143001117 19a Service Start Date (mm/dd/yyyy) 07/01/2001										
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 06/30/2002										
14 Service P	rovider Name		Powerco	om	20 C	Contract	Expiration D	ate (mm/dd/yyyy)			
Descripti 21 This Serv			with an At	ription of the service ttachment #, and no ervice - #1		_		•	osts, plus any	elevant bra	and names. Label
22 Entity/En Receiving	tities J This Service:	this service :	Head Star	ecific (provided to or nt Office - 132971 by all entities on a l		<u> </u>	· -			e entity fro	m Block 4 receiving
23 Calculation					 I				1		
A	R	ecurring Char	ges D	E		Non-	Recurring C	harges H	I	Total Cha	arges K
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	_ ~	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges	Annu	ual non- ring (one-	How much of the \$ amount in	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	Total program year pre-discount	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (x J)
37	0	37	12	444		0	0	0	444	44%	195

ntity Number Contact Person _	132971 Candace Vande	rlip				olicant's Form Ident ne Number		2002 1A 8-6232		
nstructions:		age for EACH se	service (Fun , and numb	luest(s) nding Request Numl per the completed pa be assigned by	ages to ass	ure that they are	esting discounts.	Block 5, paç	ge19	of33
11 Categor	ry of Service (only O	• •	be checked)		15 Contr	act Number (if av	vailable; use "T" if tariffed es as described in Instruc		Phone	rates (bills) = T
Telecor	mmunications Service	O Internet Acc	:ess O Ir	nternal Connections	16 Billin	Account Num	nber (e.g., billed telephor	ne number)		16488
12 Form 47	70 Application Nu	ı mber (15 digits)	5	78450000323389		able Vendor Se on Form 470 filing)	election/Contract	Date (mm/dd/yyy	/y)	12/06/2000
13 SPIN - Service Provider Identification Number (6 date)										
Identification Number (9 digits) 143001117 19a Service Start Date (mm/dd/yyyy) 07/01/2001										
19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 06/30/2										06/30/2002
14 Service	Provider Name		Powerco	Date (mm/dd/yyyy)						
21 Description This Ser	ition of rvice:		with an At	ription of the service ttachment #, and not ervice - #1				osts, plus any r	elevant bra	and names. Label
	ntities ng This Service:	this service :	Head Star	ecific (provided to or rt Office - 132971 by all entities on a E					e entity fror	m Block 4 receiving
23 Calculat		lecurring Char	raee	1	 I No	on-Recurring C	Charge	<u> </u>	Total Cha	27/106
A	В	C C	D D	E	F	G	H H	I	J	K K
Monthly \$ charge (total amount per month for service	r amount in (A) is	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non recurring (on time) \$ charg	e- the \$ amount in	1 7 1	year pre-discount	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (1xJ)
122 0 122 12 1464 0 0 0 1464 44% 644									644	

Entity Number 132971 Applicant's Form Identifier CESA2 2002 1A Contact Person Candace Vanderlip Phone Number (608) 758-6232										
Instructions: U	·	age for EACH se	ervice (Fur and numb	IUEST(S) Inding Request Number the completed pa	ages to assure	that they are	esting discounts.	Block 5, pag	ge20	of33
11 Category	of Service (only O	= -	e checked)	nternal Connections	15 Contract "MTM" if mont	t Number (if ava th-to-month service	eallable; use "T" if tariffed es as described in Instruc	tions)	Phone	rates (bills) = T
	Application Nu			78450000323389	17 Allowab		ber (e.g., billed telephorelection/Contract		/y)	12/06/2000
1	ervice Provider				 	t Award Date	(mm/dd/yyyy)			
Identification Number (9 digits) 143001117 19a Service Start Date (mm/dd/yyyy) 07/01/2001									001	
				!	19b Service	End Date (mm	v/dd/yyyy) (use only fo	or "T" or "MTM" se	ervices)	06/30/2002
14 Service P	Provider Name		Powerco	om.	20 Contract	Expiration D	Date (mm/dd/yyyy)			
Descripti 21 This Serv			with an At	ription of the service ttachment #, and no ervice - #1			•	costs, plus any	relevant bra	and names. Label
22 Entity/En Receiving	itities g This Service:	this service :	Salem Of	ecific (provided to or ffice - 132971 by all entities on a E		-	•	-	e entity fro	m Block 4 receiving
23 Calculation		ecurring Char	·	1	I Non	-Recurring C	haraes		Total Cha	arnae
A	В	C C	ges D	E	F	G	H H	I	J	K K
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is		# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	٠, ٠	How much of the \$ amount in (F) is ineligible?	Annual eligible pre- discount \$ amount for one-time charges (F minus G)		% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (IxJ)
138	0	138	12	1656	0	0	0	1656	44%	729

Entity Number _ Contact Person _	132971 Candace Vande										
Instructions:		age for EACH se	ervice (Fur , and numb	IUEST(S) nding Request Numl ber the completed pa	ages to	o assure	that they are	esting discounts.	Block 5, pag	ge21	of33
	ry of Service (only Communications Service		e checked)		15 C	Contract TM" if monti	Number (if ava h-to-month service	ailable; use "T" if tariffed s as described in Instruc	ctions)	Phone	rates (bills) = T
• relector	nmunications service		ess O	· · · · · · · · · · · · · · · · · · ·	└			ber (e.g., billed telephor			16490
	70 Application Nu	mber (15 digits)	5	78450000323389			le Vendor Sel Form 470 filing)	lection/Contract	Date (mm/dd/yyy	ry)	12/06/2000
	Service Provider	att ny taon 1			18 C	ontract	Award Date	(mm/dd/yyyy)			
luentin	Identification Number (9 digits) 143001117 19a Service Start Date (mm/dd/yyyy) 07/01/2001										
	19b Service End Date (mm/dd/yyyy) (use only for 'T" or 'MTM" services) 06/30/2002										
14 Service	Provider Name		Powerco	om	20 C	ontract	Expiration D	ate (mm/dd/yyyy)			
Descrip 21 This Se			with an At	ription of the service ttachment #, and no tervice - #1					osts, plus any i	relevant bra	and names. Label
	ng This Service:	this service :	<u>Janesville</u>	ecific (provided to or e Office - 132971 by all entities on a E			•	,		e entity froi	m Block 4 receiving
23 Calculat		ocurring Char				Non	Depursing C	\h-\max	_ _	Tatal Ch.	
A	В	ecurring Char	rges D	E E	 -	F Non-	Recurring C	narges H	I	Total Cha	arges K
Monthly \$ charge (total amount pe month for service	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annua recurrin	ıal non- ing (one-	How much of the \$ amount in	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	Total program year pre-discount	, ,	Funding Commitment \$ Request (IxJ)			
51	0	51	12	612	(0	0	0	612	44%	269

Entity Number Contact Person	132971 Candace Vande	rlip_				ant's Form Ident Iumber				
Instructions: U		age for EACH se	ervice (Fur and numb	uest(s) Inding Request Num I er the completed page I assigned by	ages to assure	that they are	sting discounts.	Block 5, pag	ge22	of33
	of Service (only C		•			•	ailable; use "T" if tariffed s as described in Instruc	•	Phone	rates (bills) = T
	nunications Service	O Internet Acc	ess OI	nternal Connections	16 Billing A	ccount Numl	ber (e.g., billed telepho	ne number)		16491
12 Form 470	Application Nu	mber (15 digits)	5	78450000323389	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 12/06/2000					
	rvice Provider				18 Contract	Award Date	(mm/dd/yyyy)			
Identification Number (9 digits) 143001117 19a Service Start Date (mm/dd/yyyy) 07/01/2001										001
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 06/30/2002									
14 Service P	rovider Name		Powerco	em .	20 Contract	Expiration D	ate (mm/dc/yyyy)			
Description 21 This Serv			with an At	iption of the service tachment #, and no ervice - #1				osts, plus any I	relevant bra	and names. Label
22 Entity/En Receiving	tities y This Service:	this service :	Dane Cou	ocific (provided to or inty Office - 132971 by all entities on a l	<u> </u>				e entity from	n Block 4 receiving
23 Calculation			• • • •			D	N	1	T-4-1 Ob	
Λ	B H	ecurring Char C	ges D	E	F Non-	Recurring C	narges H	I	Total Cha	arges K
	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non- recurring (one-	How much of the \$ amount in	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	Total program year pre-discount		Funding Commitment\$ Request (x J)
17	0	17	12	204	0	0	0	204	44%	90

Entity Number Contact Person _										
Instructions: L	· ·	age for EACH se	ervice (Fur and numb	uest(s) Inding Request Number the completed page oe assigned b	ages to assu	re that they are	_	Block 5, pag	ge23	of33
11 Category	of Service (only C	NE category should be	e checked)				ailable; use "T" if tariffed is as described in Instruc		Phone	rates (bills) = T
Telecom	munications Service	O Internet Acc	ess OI	nternal Connections			ber (e.g., billed telepho			17526
12 Form 470	Application Nu	mber (15 digits)	5	78450000323389		ble Vendor Se Form 470 filing)	lection/Contract	Date (mm/dd/yy)	y)	12/06/2000
	Identification Number (0 disits)									
identifica	Identification Number (9 digits) 143001117 19a Service Start Date (mm/dd/yyyy) 07/01/2001									
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 06/30/2002									
14 Service F	Provider Name		Powerco	m	20 Contra	ct Expiration D)ate (mm/dd/yyyy)			
Descript This Serv			with an At	iption of the service tachment #, and no ervice - #1				costs, plus any	relevant bra	and names. Label
22 Entity/Er Receivin	itities g This Service:	this service :	Janesville			-			e entity fro	m Block 4 receiving
23 Calculati		ecurring Char	290		No	n-Recurring (Charges	1	Total Cha	ardes
A	В	C	D	E	F	G	Н	I	J	K
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non- recurring (one time) \$ charge		Annual eligible pre- discount \$ amount for one-time charges (F minus G)	'	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (IxJ)
16	0	16	12	192	0	0	0	192	44%	84

Entity Number Contact Person	132971 Candace Vande	rfip					nt's Form Ident umber	ifier <u>CESA2</u> (608) 758			
nstructions: U	•	age for EACH se	ervice (Fur and numb	uest(s) Inding Request Number the completed page assigned by	ages to as	ssure	that they are	-	Block 5, pag	ge24	of33
= -	of Service (only C		-	nternal Connections	"MTM"	if month	-to-month service	ailable; use "T" if tariffed s as described in Instruc	tions)		rates (bills) = T
	Application Nu				17 Allo	wable	e Vendor Se	oer (e.g., billed telepho lection/Contract	<u> </u>		360004725
	rvice Provider		5	78450000323389			orm 470 filing) Award Date	(manafalal hana a)			12/06/2000
	tion Number (9 d	igits)	1420010	AA					<u> </u>	07/01/2	001
	143001044 19a Service Start Date (mm/dd/yyyy) 07/01/2001 19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) 06/30/2002										
14 Service P											
Descripti This Serv		this description Attachment #	with an At Phone S		te numbe	r in sp	oace provided	d below.			
Entity/En Receiving	titles g This Service:	this service :	Milton Off				-	•		e entity troi	m Block 4 receiving
23 Calculation					1			NI		T-4-1 Ob	
A	В	ecurring Char C	ges D	E	F	<u>ч-пои</u>	Recurring C	narges H	I	Total Cha	arges K
	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges	Annual n	one- t	How much of the \$ amount in	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	Total program year pre-discount	% discount (from Block 4 Worksheet)	Funding Commitment \$ 1 Request (IxJ)
900	o	900	12	10,800	0		0	0	10,800	44%	4752

Entity Number Contact Perso		erlip			,	ants Form Ideni lumber	(608) 758	2002 1A J-6232			
nstructions		age for EACH se	ervice (Fur and numb	uest(s) Inding Request Number the completed page assigned by	ages to assure	that they are	sting discounts.	Block 5, pag	ge25	of33	
11 Catego	ory of Service (only C	ONE category should be	e checked)			-	ailable; use "T" if tariffed s as described in Instruc		Phone	rates (bills) = T	
● Telec	ommunications Service	O Internet Acc	cess O I	nternal Connections	16 Billing Account Number (e.g., billed telephone number) 166708279500280900					8279500280900	
12 Form	170 Application Nu	mber (15 digits)	 5	78450000323389	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 12/6/2000						
	Service Provider			-	18 Contract Award Date (mm/dd/yyyy)						
Identii	ication Number (9 d	ligits)	1	43004791	19a Service Start Date (mm/dd/yyyy) 07/01/2001						
	·				19b Service	End Date (mm	/dd/yyyy) (use only fo	or "T" or "MTM" se	ervices)	06/30/2002	
14 Servic	e Provider Name	Verizor	North Inc	corporated	20 Contract	Expiration D	late (mm/dd/yyyy)				
	You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below. This Service: Attachment # Phone Service - #1										
-	Entities ing This Service:	this service:	Salem Off						e entity fro	m Block 4 receiving	
23 Calcul		ecurring Char	·ges		Non-	Recurring (Charges		Total Cha	arges	
A	В	С	D.	E	F	G	Н	I	J	К	
Monthly \$ char (total amount rnonth for serv	er amount in (A) is	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non- recurring (one- time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	' '		Funding Commitment \$ Request (IxJ)	
192	0	192	12	2304	0	0	0	2304	44%	1014	

Contact Perso		rlip_				ants Form Ideni Number	(608) 758	2002 1A 3-6232					
Instruction	115 Contract Number # qualitate use 5Th if trailed contract												
	ory of Service (only 0					•	ailable; use "T" if tariffed s as described in Instruc		Phone	rates (bills) = T			
◎ Tele	communications Service	O Internet Acc	ess O I	nternal Connections	16 Billing Account Number (e.g., billed telephone number) 166840270217696800								
12 Form	470 Application Nu	mber (15 digits)	5	78450000323389	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 12/6/2000								
	- Service Provider	Eultus			18 Contract Award Date (mm/dd/yyyy)								
igenti	fication Number (9 d	ngris)	1	43004791	19a Service Start Date (mm/dd/yyyy) 07/01/2001								
					19b Service	End Date (mm	/dd/yyyy) (use only fo	or "T" or "MTM" se	ervices)	06/30/2002			
14 Servi	e Provider Name	Verizor	North Inc	corporated	20 Contract	Expiration D	ate (mm/dd/yyyy)						
21	iption of Service:		with an At	ription of the service tachment #, and no ervice - #1				costs, plus any	relevant bra	and names. Label			
_	/Entities ving This Service:	this service :	Head Star		 				e entity fro	m Block 4 receiving			
23 Calcu		ecurring Char	e		Non	Recurring C	`harnes		Total Cha	arnes			
A	В	C C	D	E	F	G	H	I	J	K			
Monthly \$ cha (total amount month for serv	per amount in (A) is	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non- recurring (one- time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre- discount \$ amount for one-time charges (F minus G)		% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (IxJ)			
99	0	99	12	1188	0	0	0	1188	44%	523			

Contact Person _	Candace Vande	rlip				lumber							
Instructions:	115 Contract Number it projects and Tail to the grant												
11 Categor	of Service (only C	NE category should be	e checked)	-			ailable; use "T" if tariffed s as described in Instruc		Phone	rates (bills) = T			
Telecon	munications Service	O Internet Acc	ess O I	nternal Connections	16 Billing Account Number (e.g., billed telephone number) 166820271422166104					0271422166104			
12 Form 47	Application Nu	mber (15 digits)	5	78450000323389	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 12/6/2000								
	ervice Provider				18 Contract Award Date (mm/dd/yyyy)								
Identilic	ation Number (9 d	igits)	1	43004791	19a Service Start Date (mm/dd/yyyy) 07/01/2001								
					19b Service I	End Date (mm	/dd/yyyy) (use only fo	or "T" or "MTM" se	rvices)	06/30/2002			
14 Service	Provider Name	Verizon	North Inc	corporated	20 Contract	Expiration D	ate (mm/dd/yyyy)						
' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below. Attachment # Phone Service - #1												
22 Entity/E Receivir	ntities g This Service:	this service :	Head Star						e entity froi	m Block 4 receiving			
23 Calculat		ecurring Char	nes.		Non-	Recurring C	harnes	<u> </u>	Total Cha	ardes			
A	В	C	D	E	F	G	Н	I	J	K			
Monthly \$ charge (total amount per month for service	amount in (A) is	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	٠, ٠	How much of the \$ amount in (F) is ineligible?	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (IxJ)			
178	0	178	12	2136	0	0	0	2136	44%	940			

Contact Person	Candace Vande	rlip				Number	(608) 758	2002 1A 3-6232					
I nstructions: U	15 Contract Number (if weights use This terifod coning												
11 Category	of Service (only C	NE category should b	e checked)			•	ailable; use "T" if tariffed s as described in Instruc		Phone	rates (bills) = T			
Telecom	munications Service	O Internet Acc	ess O I	nternal Connections			ber (e.g., billed telepho		16682	0279514098508			
12 Form 470	Application Nu	mber (15 digits)	5	78450000323389	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 12/6/2000								
	rvice Provider	e-i-			18 Contract Award Date (mm/dd/yyyy)								
identinca	tion Number (9 d	agus)	1	43004791	19a Service Start Date (mm/dd/yyyy) 07/01/2001								
	· ··—		·- <u></u>		19b Service	End Date (mm	/dd/yyyy) (use only fo	or "T" or "MTM" se	rvices)	06/30/2002			
14 Service P	rovider Name	Verizor	North In	corporated	20 Contrac	t Expiration D	Pate (mm/dd/yyyy)	·					
21 Description This Serv			with an At	ription of the service tachment #, and no ervice - #1				osts, plus any	relevant bra	and names. Label			
22 Entity/En Receiving	This Service:	this service :	Salem Of			-			e entity fro	m Block 4 receiving			
23 Calculation		ecurring Char	nes		Nor	-Recurring (harnes	1	Total Cha	arnes			
A	В	C	D	E	F	G	H	1	J	K			
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non- recurring (one- time) \$ charges		Annual eligible pre- discount \$ amount for one-time charges (F minus G)		% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (IxJ)			
125	0	125	12	1500	0	0	0	1500	44%	660			

	Number ct Person	132971 Candace Vande	rlip		:			ant's Form Ident Iumber					
Instru Make	Block 5: Discount Funding Request(s) Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts. Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts. Instructions: Use one Block 5 page29 of33 Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts. Instructions: Use one Block 5 page29 of33 Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts. Instructions: Use one Block 5 page29 of33 Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts. Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts. Instructions: Use one Block 5 page29 of33 Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts. Instructions: Use one Block 5 page29 of33 Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts. Instructions: Use one Block 5 page29 of33 Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts. Instructions: Use one Block 5 page29 of33 Instructions: Use one Block 5 page29 of												
11	Category	of Service (only C	NE category should be	e checked)				•	ailable; use "T" if tariffed s as described in Instruc		Phone	rates (bills) = T	
(Telecomn	nunications Service	O Internet Acc	ess O I	nternal Connections	16 Billing Account Number (e.g., billed telephone number) 166775273924112703						5273924112703	
12	Form 470	Application Nu	mber (15 digits)	5	78450000323389	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 12/6/2000							
		rvice Provider				18 (18 Contract Award Date (mm/dd/yyyy)						
	Identification Number (9 digits) 143004791					19a	19a Service Start Date (mm/dd/yyyy) 07/01/2001						
							Service E	End Date (mm	/dd/yyyy) (use only fo	or "T" or "MTM" se	ervices)	06/30/2002	
14	Service P	rovider Name	Verizon	North Inc	corporated	20 (Contract	Expiration D	late (mm/dd/yyyy)				
וני	Description This Serv	on of		with an At	ription of the service tachment #, and no ervice - #1					osts, plus any i	relevant bra	and names. Label	
	Entity/Ent Receiving	ities This Service:	this service :	Dane Cou					·		-	m Block 4 receiving	
23	Calculatio		Oh			•	NI	D	\h		Total Ob		
	A	В	ecurring Char C	ges D	E		F Non-	Recurring C	narges H	I	Total Cha	arges K	
(total		How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges	recum	ual non- ring (one-	How much of the \$ amount in	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	Total program	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (IxJ)	
	128	0	128	12	1536		0	0	0	1536	44%	676	

Entity Number Contact Person	Candace Vander	<u>rlip</u>				ant's Form Ident Number		2002 1 A 1-6232			
Instructions: U		age for EACH se	ervice (Fur and numb	IUEST(S) Inding Request Number the completed pa	ages to assure	e that they are		Block 5, pag	ge30_	of33	
	of Service (only O	• •	,			-	ailable; use "T" if tariffed s as described in Instruc		Phone	rates (bills) = T	
O Telecom	munications Service	Internet Acc	ess O Ir	nternal Connections	16 Billing A	16 Billing Account Number (e.g., billed telephone number) 0002813890					
	Application Nu	mber (15 digits)	5	78450000323389		7 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 12/06/2000					
	ervice Provider	n u . v			18 Contract	18 Contract Award Date (mm/dd/yyyy)					
Identilica	i tion Number (9 di	igits)	1430039	<i>)</i> 52	19a Service	19a Service Start Date (mm/dd/yyyy) 07/01/2001					
		<u> </u>			19b Service	End Date (mm	/dd/yyyy) (use only fo	or "T" or "MTM" se	ervices)	06/30/2002	
14 Service P	Provider Name	Chorus Con	nmunicati	lons Group LTD	20 Contract	t Expiration D	ate (mm/dd/yyyy)				
Description This Serv	on of vice:		with an At	ription of the service ttachment #, and not Service - #1				osts, plus any i	relevant bra	and names. Label	
	tities g This Service:	this service :	Dane Cou	ecific (provided to or unty Office - 132971 by all entities on a E		-	•		e entity froi	m Block 4 receiving	
23 Calculation		ecurring Char	ges		Non	-Recurring C	Charges		Total Cha	arges	
A	В	С	D	E	F	G	H	I	J	K	
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	pre-discount amount	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non- recurring (one- time) \$ charges	the \$ amount in	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (1xJ)	
15	0	15	12	180	0	0	0	180	44%	79	

Entity Number Contact Person	132971 Candace Vande	rlip_				ant's Form Ident Iumber	ifier <u>CESA2</u> (608) 758				
Block 5: Instructions: U Make as many o	se one Block 5 p	age for EACH se	ervice (Fur and numb	that they are	esting discounts. all processed cor	Block 5, pagrectly.	ge31	of33			
	of Service (only C	NE category should b	······	oe assigned b	15 Contract Number (if available; use "T" if tariffed services,						
O Telecom	nunications Service	Internet Accordance	cess OI	nternal Connections			ber (e.g., billed telepho		0	003206467	
12 Form 470	Application Nu	mber (15 digits)	5	78450000323389	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy)						
	rvice Provider				18 Contract Award Date (mm/dd/yyyy)						
identifica	ion Number (9 d	ligits)	1430039	952	19a Service Start Date (mm/dd/yyyy) 07/01/2001						
·				!	19b Service	End Date (mm	/dd/yyyy) (use only fo	or "T" or "MTM" se	ervices)	06/30/2002	
14 Service P	rovider Name	Chorus Con	nmunicati	ons Group LTD	20 Contract	Expiration D	ate (mm/dd/yyyy)				
Description 21 This Serv			with an At	ription of the service ttachment #, and no Service - #1				osts, plus any	relevant bra	and names. Label	
22 Entity/Ent Receiving	ities This Service:	this service :	Dane Cou	ecific (provided to o unty Office - 132971 by all entities on a		-			e entity fro	m Block 4 receiving	
23 Calculation		ecurring Char	.uee		Non	Recurring C	harmee		Total Cha	ardes	
A	В	C	D D	E	F	G	H	I	J	K	
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non- recurring (one- time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre- discount \$ amount for one-time charges (F minus G)			Funding Commitment \$ Request (xJ)	
13	0	13	12	156	0	0	0	156	44%	69	

ntity Number Contact Person	132971 Candace Vande	rlip				ant's Form Iden Number		2002 1 A 3-6232				
nstructions: U	Discoun se one Block 5 pa copies of this pag	age for EACH s e	esting discounts. all processed cor	Block 5, pa	ge32	of33						
	of Service (only O		•			•	ailable; use "T" if tariffed es as described in Instruc	•	CE	SA02-0102-g		
O Telecomr	nunications Service	Internet Acc	tess O I	nternal Connections	16 Billing Account Number (e.g., billed telephone number) CESA021					CESA021		
12 Form 470	Application Nu	mber (15 digits)	5	78450000323389		17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) 12/06/2000						
	rvice Provider				18 Contrac	t Award Date	(mm/dd/yyyy)					
Identifica	t ion Number (9 d	igits)	1430043	8 5 1	19a Service	19a Service Start Date (mm/dd/yyyy) 07/01/2001						
					19b Service	End Date (mm	/dd/yyyy) (use only fo	or "T" or "MTM" se	ervices)	06/30/2002		
14 Service P	rovider Name		WiscNe	et	20 Contraç	t Expiration D	ate (mm/dd/yyyy)					
Description 21 This Serv	ice:	this description	with an At	ription of the service ttachment #, and no CESA 2 - WiscNet	te number in			costs, plus any	relevant bra	and names. Label		
22 Entity/Ent Receiving	This Service:	this service :	Milton Off			_	·		e entity fro	m Block 4 receiving		
23 Calculation				~				1	T 4.1.0b			
	B	ecurring Char C	ges D	E	Non F	-Recurring C	narges Н	I	Total Cha	arges K		
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non- recurring (one-	How much of the \$ amount in	Annual eligible pre-	Total program year pre-discount	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (IxJ)		
543.17	0	543.17	12	6,518	0	0	0	6,518	44%	2868		

Entity Number Contact Person	132971 Candace Vande	rlip				ant's Form Ident Number 		2002 1 A_ 1-6232				
nstructions: Us												
	of Service (only Only Only Controls		,		"MTM" if mor	5 Contract Number (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in Instructions) Westosha Special Ed-0101						
	Application Nu			· · · · · · · · · · · · · · · · · · ·	17 Allowak	Billing Account Number (e.g., billed telephone number) WestoshaSp1 Allowable Vendor Selection/Contract Date (mm/dd/yyyy)						
13 SPIN - Se	rvice Provider		5	78450000323389		(based on Form 470 filing) 12/06/2000 8 Contract Award Date (mm/dd/yyyy)						
ldentificat	ion Number (9 d	igits)	1430043	51	19a Service	9a Service Start Date (mm/dd/yyyy) 07/01/2001						
					19b Service	End Date (mm	/dd/yyyy) (use only fo	or "T" or "MTM" se	ervices)	06/30/2002		
14 Service P	rovider Name		WiscNe	et	20 Contrac	t Expiration D	ate (mm/dd/yyyy)					
21 Description This Serv	on of	this description	with an At	ription of the service tachment #, and no <u>WestoshaSpecialE</u>	te number in s			osts, plus any i	relevant bra	and names. Label		
22 Entity/Ent Receiving	ities This Service:	this service :	Salem Off						e entity fro	m Block 4 receiving		
23 Calculation		ecurring Char	ges		Non	-Recurring C	Charges		Total Cha	arges		
A	В	С	D	E	F	G	H	I	J	K		
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non- recurring (one- time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre- discount \$ amount for one-time charges (F minus G)	* ·	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (1xJ)		
406.25	0	406.25	12	4,875	0	0	0	4,875	44%	2145		

ntity N	Number 132971	Applicant's Form ide	ntifler CESA2 2002 1A
ıntact	t Person Candace Vanderlip	Phone Number	(608) 758-6232
	ck 6: Certifications	and Signature	
	he applicant is eligible for support bed		e or both.)
			secondary schools found in the Elementary
	and Secondary Education Ad	at of 1965, 20 U.S.C. Secs. 1	8801(14) and (25), that do not operate as for-
	profit businesses and do not		
			state library administrative agency under the
	-	••	operate as for-profit businesses and whose
	• • • • • • • • • • • • • • • • • • • •	-	ding, but not limited to, elementary and
	secondary schools, colleges,	OF UNIVERSIDES.	
5	The schools and libraries I represe	ent have secured access to a	all of the resources, including computers,
			cessary to make effective use of the
	services purchased as well as to p	pay the discounted charges f	or eligible services.
e Al	all of the individual schools, libraries, a	ad library consortia listed in	Slook 4 are enumed by
			ested in this application; and/or
	b M higher-level technology plant		
			ong distance telephone service only
7 S	Status of technology plans (if represen	ting multiple entities with mb	red technology plan status, check both a and b):
	a K technology plan(s) has/have	been approved.	
	b technology plan(s) will be ap		
•	c no technology plan needed;	applying for basic local and le	ong distance telephone service only.
8	I cortify that the entities elicible fo	r sunnort that I am represent	ting have complied with all applicable state
•	and local laws regarding procuren		
29			provided by 47 U.S.C. Sec. 254 will be
			old, or transferred in consideration for
	money or any other thing of value	,	
0	I certify that the entity(les) I repre-	sent has complied with all pro	ogram rules and I acknowledge that fallure
	to do so may result in denial of di		
128	h	al annual flamations of a surface to	and the same of th
1			s conditional, for future years, upon at are treated as sharing in the service,
	receive an appropriate share of be		ar are neared as arminish in the pervice.
	receive an appropriate site of b	shelis light figse selvices.	
32	I recognize that I may be audited	pursuant to this application a	and will retain for five years any and all
	worksheets and other records tha		
			# at 1 at
13			of the above-named entities, that I have mation, and belief, all statements of fact
	contained this request, and to the	Dest of the knowledge, initial	maton, and peres, an statements of fact
	- D'AA B -		
4 5	Signature RUL Barro		Date 1 12 01
6 F	Printed name of authorized persor	Bill Barrow	
7 T	Title or position of authorized perso	onInterim Agency Admini	strator
18 T	relephone number of authorized p	erson: (608) 758-623	2 , ext. 302
1 18 01	ns wilfully making false statements on	this form can be punished by	y fine or forfeiture, under the Communications Act,
	-	onment under Title 18 of the	

Entity Number 132971	Applicant's Form Identifier	CESA2 2002 1A
Contact Person Candace Vanderlip	Phone Number	(608) 758-6232
i e		1

NOTICE TO INDIVIDUALS: Section 54.504 of the Federal Communications Commission's rules requires all schools and libraries ordering services that are eligible for and seeking universal service discounts to file this Services Ordered and Certification Form (FCC Form 471) with the Universal Service Administrator, 47 C.F.R. § 54.504. The collection of information stems from the Commission's authority under Section 254 of the Communications Act of 1934, as amended, 47 U.S.C. § 254. The data in the report will be used to ensure that schools and libraries comply with the competitive bidding requirement contained in 47 C.F.R. § 54.504. All schools and libraries planning to order service eligible for universal service discounts must file this form themselves or as part of a consortium.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

The FCC is authorized under the Communications Act of 1984, as amended, to collect the personal information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or a potential violation of a FCC statute, regulation, rule or order, your application may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing, or implementing the statute, rule, regulation or order. In cartain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government is a party of a proceeding before the body or has an interest in the proceeding.

if you owe a past due debt to the Federal government, the taxpayer identification number (such as your social security number) and other information you provide may also be disclosed to the Department of the Treasury Financial Management Service, other Federal agencies and/or your employer to offset your salary, IRS tax refund or other payments to collect that debt. The FCC may also provide the information to these agencies through the matching of computer records when authorized.

If you do not provide the information we request on the form, the FCC may delay processing of your application or may return your application without action.

The foregoing Notice is required by the Privacy Act of 1974, Pub. L. No. 93-579, December 31, 1974, 5 U.S.C. § 552, and the Paperwork Reduction Act of 1995, Pub. L. No. 104-13, 44 U.S.C. § 3501, et seq.

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Please submit this form to:

SLD-Form 471 P.O. Box 7026 Lawrence, Kansas 66044-7026

For express delivery services or U.S. Postal Service, Return Receipt Requested, mail this form to:

SLD-Form 471 c/o Ms. Smith 3833 Greenway Drive Lawrence Kansas 66046 (888) 203-8100

ATTACHMENT # PHONE SERVICE - #1 & INTERNET SERVICE - #1

Serv <u>Prov</u>		SPIN#	Billing Account <u>Number</u>	Contracting <u>Party</u>	
Ameritech	· •••	143001856	920 674 5577 141 7	CESA #2	1
Ameritech		143001856	920 261 8716 925 5	CESA #2	2
Ameritech		143001856	608 250 5210 131 6	CESA #2	3
Ameritech		143001856	608 756 3147 420 2	CESA #2	4
Ameritech	Both	143001856	608 755 0743 228 5	CESA #2	5
Ameritech		143001856	920 674 0666 659 1	CESA #2	6
Ameritech		143001856	920 563 8306 623 1	CESA #2	7
Ameritech	_}	143001856	608 741 6687 297 5	CESA #2	8
AT & T	Long	143001192	053 172 6237 001	CESA #2	9
AT & T	Distance	143001192	053 208 7817 001	CESA #2	10
CenturyTel	٦-	143001819	157 868 0005	CESA #2	11
CenturyTel	Both	143001819	608 868 4717	CESA #2	12
CenturyTei	_]	143001819	262 593 5979	CESA #2	13
Mc Leod USA	Long Dist	143000074	3681861	CESA #2	14
Powercom	- '1	143001117	16483	CESA #2	15
Powercom		143001117	16485	CESA #2	16
Powercom		143001117	16486	CESA #2	17
Powercom	Long	143001117	16487	CESA #2	18
Powercom	Distance	143001117	16488	CESA #2	19
Powercom		143001117	16489	CESA #2	20
Powercom		143001117	16490	CESA #2	21
Powercom		143001117	16491	CESA #2	22
Powercom	.]	143001117	17526	CESA #2	23
U S Cellular	Cellular	143003952	360004725	CESA #2	24
Verizon		143004791	166708279500280900	CESA #2	25
Verizon		143004791	166840270217696800	CESA #2	26
Verizon	Both	143004791	166820271422166104	CESA #2	27
Verizon		143004791	166820279514098508	CESA #2	28
VerizonJ		143004791	166775273924112703	CESA #2	29
Chorus Comm	Group LTD-	143003952			30
Chorus Comm	n Group LTD_	143003952	0003206467	CESA #2	31
	İ	nternet			

Attachment # WM-1-g CESA 2 - WiscNet

Description of Internet Access Service(s) SLD Program Year 2001-2002

Contract Number	CESA02-0102-g
Service Provider	WiscNet
SPIN	143004351
Contracting Party	CESA 2

Services

Service	Start Date	One-Time Cost	Monthly Cost	Annual Cost
WiscNet BackDoor Service	07/01/2001	\$0.00	\$0.00	\$0.00
WiscNet Circuit Charge	07/01/2001	\$0.00	\$0.00	\$0.00
WiscNet Email Service	07/01/2001	\$0.00	\$20.50	\$246.00
WiscNet Internet Service	07/01/2001	\$0.00	\$514.33	\$6,172.00
WiscNet IP Address Block Charge	07/01/2001	\$0.00	\$0.00	\$0.00
WiscNet ListServ Service	07/01/2001	\$0.00	\$8.33	\$100.00
WiscNet Startup Charge	07/01/2001	\$0.00	\$0.00	\$0.00
WiscNet Upgrade Charge	07/01/2001	\$0.00	\$0.00	\$0.00
Totals		\$0.00	\$543.17	\$6,518.00

Comments

October-November 2000 Adjusted Prime-Time Maximum internet Service Flow-Rate (bits per second):

99752

April 2002 Estimated Prime-Time Maximum Internet Service Flow-Rate (bits per second):

249380

Attachment # WM-1-g WestoshaSpecialEd - WiscNet

Description of Internet Access Service(s) SLD Program Year 2001-2002

Contract Number	WestoshaSpecialEd-0102-g
Service Provider	WiscNet
SPIN	143004351
Contracting Party	WestoshaSpecialEd

Services

Service	Start Date	One-Time Cost	Monthly Cost	Annual Cost
WiscNet BackDoor Service	07/01/2001	\$0.00	\$0.00	\$0.00
WiscNet Circuit Charge	07/01/2001	\$0.00	\$0.00	\$0.00
WiscNet Emall Service	07/01/2001	\$0.00	\$0.00	\$0.00
Wischet Internet Service	07/01/2001	\$0.00	\$406.25	\$4,875.00
WiscNet IP Address Block Charge	07/01/2001	\$0.00	\$0.00	\$0.00
WiscNet ListServ Service	07/01/2001	\$0.00	\$0.00	\$0.00
WiscNet Startup Charge	07/01/2001	\$0.00	\$0.00	\$0.00
WiscNet Upgrade Charge	07/01/2001	\$0.00	\$0.00	\$0.00
Totais		\$0.00	\$406.25	\$4,875.00

Comments

October-November 2000 Adjusted Prime-Time Maximum Internet Service Flow-Rate (bits per second):

5473

April 2002 Estimated Prime-Time Maximum Internet Service Flow-Rate (bits per second):

13683